

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Mooney for Congress

ADDRESS (number and street)

PO Box 1863

Check if different
than previously
reported. (ACC)

Martinsburg

WV

25402

2. FEC IDENTIFICATION NUMBER ▼

C

C00506774

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

WV

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2015

through

M M / D D / Y Y Y Y

03 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Peter Onoszko

Signature of Treasurer

Peter Onoszko

[Electronically Filed]

Date

M M / D D / Y Y Y Y

12 / 09 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Mooney for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	185244.35	285822.48
(b) Total Contribution Refunds (from Line 20(d))	200.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	185044.35	285622.48
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	73710.87	176466.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	73710.87	176466.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	115137.56	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 85

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Mooney for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

112475.00

145454.63

(ii) Unitemized.....

18601.42

27999.92

(iii) TOTAL of contributions from individuals ▶

131076.42

173454.55

(b) Political Party Committees.....

500.00

1700.00

(c) Other Political Committees (such as PACs).....

53667.93

110667.93

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

185244.35

285822.48

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

185244.35

285822.48

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	73710.87	176466.98
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	200.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	200.00	200.00
21. OTHER DISBURSEMENTS	82.07	5282.07
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	73992.94	181949.05

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3886.15
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	185244.35
25. SUBTOTAL (add Line 23 and Line 24).....	189130.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	73992.94
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	115137.56

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 85
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial) STEPHANIE ABRAMOWITZ			Date of Receipt M M / D D / Y Y Y Y Y 03 / 23 / 2015	
Mailing Address 12 STONY POINT RD.			Transaction ID : SA11.10705	
City	State	Zip Code	Amount of Each Receipt this Period _____ 250.00	
CHARLESTON	WV	25314-1670	CONTRIBUTION	
FEC ID number of contributing federal political committee.		C _____		
Name of Employer HOMEMAKER		Occupation HOMEMAKER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 250.00		

B. Full Name (Last, First, Middle Initial) IDALIA ACOSTA			Date of Receipt M M / D D / Y Y Y Y Y 02 / 09 / 2015	
Mailing Address 1546 EDINBORO DR.			Transaction ID : SA11.10461	
City	State	Zip Code	Amount of Each Receipt this Period _____ 50.00	
JONESBORO	GA	30236-5185	CONTRIBUTION	
FEC ID number of contributing federal political committee.		C _____		
Name of Employer NONE		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 275.00		

C. Full Name (Last, First, Middle Initial) DANA ANDERSON			Date of Receipt M M / D D / Y Y Y Y Y 02 / 09 / 2015	
Mailing Address 100 FALL CREEK RD.			Transaction ID : SA11.10399	
City	State	Zip Code	Amount of Each Receipt this Period _____ 250.00	
LAWRENCE	KS	66049-9067	CONTRIBUTION	
FEC ID number of contributing federal political committee.		C _____		
Name of Employer MACERICH		Occupation VICE CHAIRMAN		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 250.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 550.00
TOTAL This Period (last page this line number only).....	_____

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

IRWIN AZMAN

Mailing Address 119 OLD PLANTATION WAY

City

BALTIMORE

State

MD

Zip Code

21208-6381

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10692

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOSH BAILEY

Mailing Address 1271 CUMBERLAND RD

City

ATLANTA

State

GA

Zip Code

30306-2219

FEC ID number of contributing
federal political committee.

C

Name of Employer

SRG

Occupation

DIRECTOR OF ACCOUNTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		16		2015

Transaction ID : SA11.10377

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOSH BAILEY

Mailing Address 1271 CUMBERLAND RD

City

ATLANTA

State

GA

Zip Code

30306-2219

FEC ID number of contributing
federal political committee.

C

Name of Employer

SRG

Occupation

DIRECTOR OF ACCOUNTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2015

Transaction ID : SA11.10483

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

JOSH BAILEY

Mailing Address 1271 CUMBERLAND RD

City

ATLANTA

State

GA

Zip Code

30306-2219

FEC ID number of contributing
federal political committee.

C

Name of Employer

SRG

Occupation

DIRECTOR OF ACCOUNTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		16		2015

Transaction ID : SA11.10691

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

KAREN BAILEY

Mailing Address 1505 BERRYVILLE PIKE

City

RIPPON

State

WV

Zip Code

25441-

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PUBLIC AFFAIRS PROFESSIONAL

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		23		2015

Transaction ID : SA11.10707

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

RAY R. BARRETT, JR.

Mailing Address HC 34 BOX 3

City

MIDKIFF

State

TX

Zip Code

79755-9801

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

RANCHER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		20		2015

Transaction ID : SA11.10509

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

ELLEN L. BARROSSE

Mailing Address 551 HORSESHOE HILL RD.

City

HOCKESSIN

State

DE

Zip Code

19707-9360

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		09		2015

Transaction ID : SA11.10478

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

A.

Full Name (Last, First, Middle Initial)

KIMBERLY BELLISSIMO

Mailing Address 1308 RHODE ISLAND AVE NW

City

WASHINGTON

State

DC

Zip Code

20005-3710

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORTHRIGHT STRATEGY, INC.

Occupation

FUNDRAISING COUNSEL

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2015

Transaction ID : SA11.10721

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

BROCK BIERMAN

Mailing Address 35086 HARRY BYRD HIGHWAY

City

ROUND HILL

State

VA

Zip Code

20141-2124

FEC ID number of contributing
federal political committee.

C

Name of Employer

SENIOR DIRECTOR

Occupation

ANCESTRY.COM

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2015

Transaction ID : SA11.10679

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

CRAIG BLAIR

A.

Mailing Address 47 WASSER DRIVE

City

MARTINSBURG

State

WV

Zip Code

25403-0885

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUNSET WATER, INCOccupation
SELF EMPLOYED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2015

Transaction ID : SA11.10720

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MARK BLOOM

B.

Mailing Address 9026 ELIZABETH RD

City

HOUSTON

State

TX

Zip Code

77055-6505

FEC ID number of contributing
federal political committee.

C

Name of Employer
SQUARE MILE ENGERYOccupation
GEOLOGIST/PART OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		09		2015

Transaction ID : SA11.10556

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MICHAEL BOWERSOX

C.

Mailing Address 7935 WORMANS MILL RD.

City

FREDERICK

State

MD

Zip Code

21701-3047

FEC ID number of contributing
federal political committee.

C

Name of Employer
BEN LEWIS INC.Occupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		03		2015

Transaction ID : SA11.10388

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

BARBARA BOWIE-WHITMAN**A.**

Mailing Address 4326 UPLAND DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22310-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2015

Transaction ID : SA11.10553

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMES O. BUNN II**B.**

Mailing Address 910 NEWTON RD.

City

CHARLESTON

State

WV

Zip Code

25314-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer

COAL RIVER ENERGY

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10543

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMES O. BUNN II**C.**

Mailing Address 910 NEWTON RD.

City

CHARLESTON

State

WV

Zip Code

25314-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer

COAL RIVER ENERGY

Occupation

EXECUTIVE

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10544

Amount of Each Receipt this Period

1200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4150.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

ELI BURMAN

Mailing Address 3203 ENCLAVE CT.

City

BALTIMORE

State

MD

Zip Code

21208-3318

FEC ID number of contributing
federal political committee.

C

Name of Employer

ATTORNEY

Occupation

SELF-EMPLOYED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10693

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MICHAEL E. CARYL

Mailing Address 210 N. GEORGIA AVE.

City

MARTINSBURG

State

WV

Zip Code

25401-2022

FEC ID number of contributing
federal political committee.

C

Name of Employer

BOWLES RICE LLP

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2015

Transaction ID : SA11.10709

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ELEANOR COBB

Mailing Address 131 S VISTA ST

City

LOS ANGELES

State

CA

Zip Code

90036-

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Transaction ID : SA11.10801

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

NANCY COHEN

A.

Mailing Address P.O. BOX 756

City

BROOKLANDVILLE

State

MD

Zip Code

21022-0756

FEC ID number of contributing
federal political committee.

C

Name of Employer
BUSINESS OWNER

Occupation

EDDIES RULAND PARK

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10694

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

BRYAN COKELEY

B.

Mailing Address 1557 CONNELL RD.

City

CHARLESTON

State

WV

Zip Code

25314-

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEPTOE & JOHNSON PLLC

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10531

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

THOMAS W. COLOMB

C.

Mailing Address 1001 MARINA DR. APT. 613

City

QUINCY

State

MA

Zip Code

02171-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer
MURPHY HESSE TOOMEY & LEHANE LLP

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2015

Transaction ID : SA11.10512

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

JONATHAN CORDISH

Mailing Address 5708 GREENLAND RD.

City

BALTIMORE

State

MD

Zip Code

21210-

FEC ID number of contributing
federal political committee.

C

Name of Employer
CTR MANAGEMENTOccupation
REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10695

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MATTHEW CRAKES

Mailing Address P.O. BOX 7421

City

GREENWICH

State

CT

Zip Code

06836-7421

FEC ID number of contributing
federal political committee.

C

Name of Employer
CANAAAN VALLEY CAPITALOccupation
FAMILY OFFICE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2015

Transaction ID : SA11.10485

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

KEN DAVIS

Mailing Address 327 OAK LANE

City

RICHMOND

State

VA

Zip Code

23226-1655

FEC ID number of contributing
federal political committee.

C

Name of Employer
HUNTON & WILLIAMSOccupation
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2015

Transaction ID : SA11.10481

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

VALERIE ELLIS**A.**

Mailing Address 86 CRESTRIDGE DR.

City

SCOTT DEPOT

State

WV

Zip Code

25560-

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10768

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOSEPH ENGELHARD**B.**

Mailing Address 10329 ECLIPSE LANE

City

GREAT FALLS

State

VA

Zip Code

22066-1731

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAP ALPHA

Occupation

ANALYST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2015

Transaction ID : SA11.10554

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

KAREN S. EVANS**C.**

Mailing Address 218 FIREFLY LANE

City

MARTINSBURG

State

WV

Zip Code

25403-1068

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

CONSULTANT(RETIRED FED)

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10760

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

ALAN FISHBEIN

Mailing Address 8156 MAIN STREET

City

ELLICOTT CITY

State

MD

Zip Code

21043-4619

FEC ID number of contributing
federal political committee.

C

Name of Employer

FISHBEIN & FISHBEIN

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10696

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JACK FITZGERALD

Mailing Address 11411 ROCKVILLE PIKE

City

ROCKVILLE

State

MD

Zip Code

20852-

FEC ID number of contributing
federal political committee.

C

Name of Employer

FITZGERALD AUTO MALL

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Transaction ID : SA11.10943

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ZORAIDA FONALLEDAS

Mailing Address PO BOX 364249

City

SAN JUAN

State

PR

Zip Code

00936-4249

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2015

Transaction ID : SA11.10677

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

JAMES E. FOX

Mailing Address 5615 NEBRASKA AVENUE, NW

City

WASHINGTON

State

DC

Zip Code

20015-1257

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2015

Transaction ID : SA11.10675

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM FOX

Mailing Address 13 HAMBLETON CT.

City

BALTIMORE

State

MD

Zip Code

21208-3333

FEC ID number of contributing
federal political committee.

C

Name of Employer

FOX RESIDENTIAL AUCTIONS, LLC

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10697

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HOWARD FRIEDMAN

Mailing Address 106 OLD COURT RD.

City

BALTIMORE

State

MD

Zip Code

21208-4038

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INVESTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2015

Transaction ID : SA11.10725

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

JOSE FUENTES

A.

Mailing Address 750 9TH ST. NW, STE. 750

City

WASHINGTON

State

DC

Zip Code

20001-4589

FEC ID number of contributing
federal political committee.

C

Name of Employer

EASTPORT STRATEGIES LLC

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2015

Transaction ID : SA11.10678

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

JOSEPH V. FUNDERBURK

Mailing Address 113 CYRUS PT.

City

CHARLESTON

State

WV

Zip Code

25314-

FEC ID number of contributing
federal political committee.

C

Name of Employer

WV PHYSICIANS MUTUAL INSURANCE

Occupation

BOARD OF DIRECTORS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10539

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

BLAIR M. GARDNER

Mailing Address 59 ABNEY CIRCLE

City

CHARLESTON

State

WV

Zip Code

25314-1343

FEC ID number of contributing
federal political committee.

C

Name of Employer

JACKSON KELLY PLLC

Occupation

LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		03		2015

Transaction ID : SA11.10391

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

MR. KENNETH GEAR

Mailing Address 9081 EMMA ANN WAY

City

FAIRFAX STATION

State

VA

Zip Code

22039-3086

FEC ID number of contributing
federal political committee.

C

Name of Employer

LEADING BUILDERS FOR AMERICA

Occupation

EXECUTIVE DIRECTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10527

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CHARLES HAGEBOECK

Mailing Address PO BOX 7520

City

CHARLESTON

State

WV

Zip Code

25356-

FEC ID number of contributing
federal political committee.

C

Name of Employer

CITY NATIONAL BANK

Occupation

VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10773

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. DIRK D. HAIRE

Mailing Address 3563 OLD TRAIL RD.

City

EDGEWATER

State

MD

Zip Code

21037-2704

FEC ID number of contributing
federal political committee.

C

Name of Employer

FOX ROTHSCHILD, LLP

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2015

Transaction ID : SA11.10482

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
THERESE HARLOW

Mailing Address 2917 BOWERS RD.

City	State	Zip Code
KEARNEYSVILLE	WV	25430-9745

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10751

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THERESE HARLOW

Mailing Address 2917 BOWERS RD.

City	State	Zip Code
KEARNEYSVILLE	WV	25430-9745

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10752

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM JACK HARLOW JR.

Mailing Address 2917 BOWERS RD.

City	State	Zip Code
KEARNEYSVILLE	WV	25430-9745

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10749

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

 Full Name (Last, First, Middle Initial)
WILLIAM JACK HARLOW JR.

Mailing Address 2917 BOWERS RD.

City	State	Zip Code
KEARNEYSVILLE	WV	25430-9745

 FEC ID number of contributing
 federal political committee.

 Name of Employer
 RETIRED

 Occupation
 RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10750

Amount of Each Receipt this Period

CONTRIBUTION

A.

 Full Name (Last, First, Middle Initial)
JOE O. HARPER

Mailing Address P.O. BOX 9

City	State	Zip Code
SENECA ROCKS	WV	26884-

 FEC ID number of contributing
 federal political committee.

 Name of Employer
 HARPER'S OLD COUNTRY STORE

 Occupation
 OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Transaction ID : SA11.10938

Amount of Each Receipt this Period

CONTRIBUTION

B.

 Full Name (Last, First, Middle Initial)
BOBBYE F. HARRIS

Mailing Address 135 WINDSOR DR.

City	State	Zip Code
CALHOUN	GA	30701-2055

 FEC ID number of contributing
 federal political committee.

 Name of Employer
 RETIRED

 Occupation
 RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2015

Transaction ID : SA11.10508

Amount of Each Receipt this Period

CONTRIBUTION

C.
SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 85
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial) MYKEL L. HARRIS			Date of Receipt M M / D D / Y Y Y Y Y 03 / 23 / 2015	
Mailing Address 3709 SOUTH GATE CT.			Transaction ID : SA11.10712	
City TEMPLE HILLS	State MD	Zip Code 20748-	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer SELF		Occupation CONSULTANT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) BENNETT K. HATFIELD			Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2015	
Mailing Address PO BOX 2405			Transaction ID : SA11.10775	
City CHARLESTON	State WV	Zip Code 25329-2405	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer PATRIOT COAL		Occupation PRESIDENT AND CHIEF EXECUTIVE OFFIC		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) JOHN T. HAZEL JR.			Date of Receipt M M / D D / Y Y Y Y Y 02 / 09 / 2015	
Mailing Address 6254 HUNTLEY RD.			Transaction ID : SA11.10473	
City BROAD RUN	State VA	Zip Code 20137-1830	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....			1500.00	
TOTAL This Period (last page this line number only).....				

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

JAMES HEATER**A.**

Mailing Address 112 LEE ST

City

GASSAWAY

State

WV

Zip Code

26624-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Transaction ID : SA11.10933

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROY HENDERSON**B.**

Mailing Address P.O. BOX 88

City

SHEPHERDSTOWN

State

WV

Zip Code

25443-0088

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2015

Transaction ID : SA11.10722

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMES HUDGINS**C.**

Mailing Address 10101 CHATHAM CT

City

FREDERICKSBURG

State

VA

Zip Code

22408-9566

FEC ID number of contributing
federal political committee.

C

Name of Employer

ST JUDE CHURCH

Occupation

PRIEST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2015

Transaction ID : SA11.10379

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

DAVID HURWITZ

Mailing Address 3505 ANTON FARMS RD.

City

BALTIMORE

State

MD

Zip Code

21208-1702

FEC ID number of contributing
federal political committee.

C

Name of Employer
ATLAS FINANCIALOccupation
INVESTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10698

Amount of Each Receipt this Period

750.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

STEVE HURWITZ

Mailing Address 1777 REISTERSTOWN RD.

City

BALTIMORE

State

MD

Zip Code

21208-1306

FEC ID number of contributing
federal political committee.

C

Name of Employer
ATLAS FINANCIALOccupation
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10699

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CHARLES B. JOHNSON

Mailing Address 703 ISLAND DR.

City

PALM BEACH

State

FL

Zip Code

33480-4742

FEC ID number of contributing
federal political committee.

C

Name of Employer
FRANKLIN INVESTMENTSOccupation
CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10541

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3850.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

MR. ROBERT JOHNSTON

Mailing Address 1550 MT. ALPHA RD

City

CHARLESTON

State

WV

Zip Code

25304-2729

FEC ID number of contributing
federal political committee.

C

Name of Employer
RIVER TRADING CO.Occupation
MANAGER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2015

Transaction ID : SA11.10717

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ANDREW JORDON

Mailing Address ONE NORWOOD RD.

City

CHARLESTON

State

WV

Zip Code

25314-1326

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10535

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ANDREW JORDON

Mailing Address ONE NORWOOD RD.

City

CHARLESTON

State

WV

Zip Code

25314-1326

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10536

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 25 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

THOMAS KNUTSON JR.

Mailing Address 52 CATERA CT.

City

MARTINSBURG

State

WV

Zip Code

25403-0894

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10729

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

B. LEE LAMPTON

Full Name (Last, First, Middle Initial)

LEE LAMPTON

Mailing Address PO BOX 2401

City

JACKSON

State

MS

Zip Code

39225-2401

FEC ID number of contributing
federal political committee.

C

Name of Employer
ERGON INC.Occupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10744

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. LESLIE B. LAMPTON

Full Name (Last, First, Middle Initial)

LESLIE B. LAMPTON

Mailing Address PO BOX 2401

City

JACKSON

State

MS

Zip Code

39225-2401

FEC ID number of contributing
federal political committee.

C

Name of Employer
ERGON INC.Occupation
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10745

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

ELI LEHRER

Mailing Address 12690 FOX WOODS DRIVE

City

HERNDON

State

VA

Zip Code

20171-4901

FEC ID number of contributing
federal political committee.

C

Name of Employer

HEARTLAND INSTITUTE

Occupation

VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		06		2015

Transaction ID : SA11.10397

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

THOMAS W. LESLIE

Mailing Address 345 CONCORD AVE.

City

BERKELEY SPRINGS

State

WV

Zip Code

25411-1235

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

DENTIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		23		2015

Transaction ID : SA11.10718

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

RODGER LEVIN

Mailing Address 10 NEW PLANT COURT

City

OWINGS MILLS

State

MD

Zip Code

21117-3514

FEC ID number of contributing
federal political committee.

C

Name of Employer

DENTIST

Occupation

LEVIN GROUP INC

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2015

Transaction ID : SA11.10724

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
NOAH LIGHTMANMailing Address **5 FARRINGDON CT.**

City	State	Zip Code
BALTIMORE	MD	21209-2507

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10726

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMES FRANCIS LINSENMEYERMailing Address **106 YORKTOWNE PL**

City	State	Zip Code
CHARLESTON	WV	25309-8284

FEC ID number of contributing
federal political committee.**C**

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10530

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMES FRANCIS LINSENMEYERMailing Address **106 YORKTOWNE PL**

City	State	Zip Code
CHARLESTON	WV	25309-8284

FEC ID number of contributing
federal political committee.**C**

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10537

Amount of Each Receipt this Period

125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1125.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

ANTONIO LONGO

Mailing Address 4014 FORT WORTH AVENUE

City

ALEXANDRIA

State

VA

Zip Code

22304-1713

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2015

Transaction ID : SA11.10681

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DAVID E. LYCAN

Mailing Address 3669 WINDING WOOD LANE

City

LEXINGTON

State

KY

Zip Code

40515-

FEC ID number of contributing federal political committee.

C

Name of Employer

DAVID LYCAN LAW OFFICES

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10534

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SCOTT H. MACKENZIE

Mailing Address 11300 MORGAN RIDGE LN.

City

NOKESVILLE

State

VA

Zip Code

20181-1940

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2015

Transaction ID : SA11.10779

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

CHARLES MADDY

Mailing Address 530 ROLLING ACRES DR.

City

OLD FIELDS

State

WV

Zip Code

26845-9183

FEC ID number of contributing
federal political committee.

C

Name of Employer

SUMMIT FINANCIAL GROUP

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2015

Transaction ID : SA11.10719

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MICHAEL MCCOWN

Mailing Address 4910 WASHINGTON ST. W

City

CHARLESTON

State

WV

Zip Code

25313-

FEC ID number of contributing
federal political committee.

C

Name of Employer

MICHAEL MCCOWN LAND CO

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10533

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBERT G. MCLUSKY

Mailing Address 1869 LOUDON HEIGHTS RD.

City

CHARLESTON

State

WV

Zip Code

25314-1564

FEC ID number of contributing
federal political committee.

C

Name of Employer

JACKSON KELLY

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10774

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 30 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

ROBERT A. MCMILLAN

A.

Mailing Address 2332 TERRAPIN NECK RD.

City

SHEPHERDSTOWN

State

WV

Zip Code

25443-

FEC ID number of contributing
federal political committee.

C

Name of Employer

JEFFERSON DISTRIBUTING CO

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2015

Transaction ID : SA11.10480

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ROBERT A. MCMILLAN JR.

Mailing Address 82 N. TAMARAC DR.

City

SHEPHERDSTOWN

State

WV

Zip Code

25443-4013

FEC ID number of contributing
federal political committee.

C

Name of Employer

JEFFERSON DISTRIBUTIONS CO. INC

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2015

Transaction ID : SA11.10384

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

JOHN T. MILLAY

Mailing Address 998 ARDEN-NOLLVILLE RD.

City

INWOOD

State

WV

Zip Code

25428-4091

FEC ID number of contributing
federal political committee.

C

Name of Employer

VALLEY GUNS II

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10763

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial) JOHN C. MILLER		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2015
Mailing Address 107 LAUNCHRIS DR.		Transaction ID : SA11.10757
City WINCHESTER	State VA	Zip Code 22602-6678
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer MILLER AUTO GROUP	Occupation OWNER	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) KENDALL C. MILLER		Date of Receipt M M / D D / Y Y Y Y Y 02 / 09 / 2015
Mailing Address 7350 S. WAKEFIELD		Transaction ID : SA11.10443
City REEDLEY	State CA	Zip Code 93654-9405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer KENTROL	Occupation FARM MANAGER	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) ANTONIO MONROIG		Date of Receipt M M / D D / Y Y Y Y Y 03 / 11 / 2015
Mailing Address 1250 CONNECTICUT AVE. NW STE 200		Transaction ID : SA11.10682
City WASHINGTON	State DC	Zip Code 20036-2643
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

EDWARD MOONEY JR.

Mailing Address 7038 NORTH BEACH DR

City

FOX POINT

State

WI

Zip Code

53217-

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2015

Transaction ID : SA11.10732

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

EDWARD MOONEY JR.

Mailing Address 7038 NORTH BEACH DR

City

FOX POINT

State

WI

Zip Code

53217-

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2015

Transaction ID : SA11.10733

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AL MOORE

Mailing Address 9910 PAGE AVE

City

SAINT LOUIS

State

MO

Zip Code

63132-1431

FEC ID number of contributing
federal political committee.

C

Name of Employer

MFD

Occupation

FOOD DIST.

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		25		2015

Transaction ID : SA11.10873

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 33 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
TED MORGANMailing Address **P.O. BOX 10**

City	State	Zip Code
BERKELEY SPRINGS	WV	25411-0010

FEC ID number of contributing
federal political committee.**C**Name of Employer
STS INTERNATIONAL INCOccupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10731

Amount of Each Receipt this Period

1200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
HECTOR MOTRONIMailing Address **44 TURKEY HILL ROAD SOUTH**

City	State	Zip Code
WESTPORT	CT	06880-5521

FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2015

Transaction ID : SA11.10518

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
JOHN FRANCIS MURPHYMailing Address **2181 JAMIESON AVE UNIT 610**

City	State	Zip Code
ALEXANDRIA	VA	22314-5749

FEC ID number of contributing
federal political committee.**C**Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Transaction ID : SA11.10901

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

MR. MARK NEUMANN

Mailing Address 510 GARRISON FOREST RD

City

OWINGS MILLS

State

MD

Zip Code

21117-4000

FEC ID number of contributing federal political committee.

C

Name of Employer
510 VENTURES LLCOccupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10700

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROGER NICHOLSON

Mailing Address 1557 QUARRIER STREET

City

CHARLESTON

State

WV

Zip Code

25311-2407

FEC ID number of contributing federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2015

Transaction ID : SA11.10522

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. MARGUERITE PALIZZI

Mailing Address 4017 N STAFFORD ST

City

ARLINGTON

State

VA

Zip Code

22207-4628

FEC ID number of contributing federal political committee.

C

Name of Employer
NONEOccupation
LIBRARIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2015

Transaction ID : SA11.10445

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 85

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
SCOTT S. PARKES

A. Mailing Address 105 BING COURT

City	State	Zip Code
WINCHESTER	VA	22602-

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTHERN EAGLE INC.Occupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10529

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
P. JUSTIN PEARLSTONE

B. Mailing Address 7013 ROCK STREAM CT.

City	State	Zip Code
BALTIMORE	MD	21209-3745

FEC ID number of contributing
federal political committee.

C

Name of Employer
UBS FINANCIAL SERVICESOccupation
FINANCIAL ADVISOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10701

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
NICHOLAS PEAY JR.

C. Mailing Address 2965 FAIRMONT BLVD.

City	State	Zip Code
CLEVELAND HEIGHTS	OH	44118-4060

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Transaction ID : SA11.10806

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
ROBERT W. PEDDICORDMailing Address **P.O. BOX 545**

City	State	Zip Code
KINGWOOD	WV	26537-

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRESTON SILVER EAGLE CO.Occupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Transaction ID : SA11.10874

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
MR. DONALD J. PENNIALLMailing Address **1413 - 8TH ST.**

City	State	Zip Code
CORONADO	CA	92118-2202

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2015

Transaction ID : SA11.10409

Amount of Each Receipt this Period

600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
MICHAEL PILLSBURYMailing Address **3017 O ST NW**

City	State	Zip Code
WASHINGTON	DC	20007-3108

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
POLITICAL SCIENTIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10762

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3550.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
A. MICHAEL PILLSBURY

Mailing Address 3017 O ST NW

City
WASHINGTONState
DCZip Code
20007-3108FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
POLITICAL SCIENTIST

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10992

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. WILLIAM PORTH

Mailing Address 1561 THOMAS CIRCLE

City
CHARLESTONState
WVZip Code
25314-1657FEC ID number of contributing
federal political committee.

C

Name of Employer
ROBINSON & MCELWEEOccupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10769

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. WILLIAM PORTH

Mailing Address 1561 THOMAS CIRCLE

City
CHARLESTONState
WVZip Code
25314-1657FEC ID number of contributing
federal political committee.

C

Name of Employer
ROBINSON & MCELWEEOccupation
LAWYER

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10770

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 38 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

MELODY POTTER

Mailing Address 105 NEWCOMER ROAD

City

SOUTH CHARLESTON

State

WV

Zip Code

25309-8544

FEC ID number of contributing
federal political committee.

C

Name of Employer

TRI-STAR COAL SALES COMPANY

Occupation

SMALL BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2015

Transaction ID : SA11.10555

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

James Reibel

Mailing Address 42 Doubling Road

City

Greenwich

State

CT

Zip Code

06830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2015

Transaction ID : 79800

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

JAMES REIBEL

Mailing Address 42 DOUBLING ROAD

City

GREENWICH

State

CT

Zip Code

06830-4859

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2015

Transaction ID : SA11.10523

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

5650.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 39 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

MARTIN RIGGS**A.**

Mailing Address

City

MOREFIELD

State

WV

Zip Code

23669-

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

REAL ESTATE DEVELOPER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10777

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

STEPHEN G. ROBERTS**B.**

Mailing Address 1326 MORNINGSIDE DR.

City

CHARLESTON

State

WV

Zip Code

25314-

FEC ID number of contributing
federal political committee.

C

Name of Employer

WV CHAMBER OF COMMERCE

Occupation

EXECUTIVE DIRECTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10532

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. RONALD ROBINSON**C.**

Mailing Address 11207 LONGWOOD GROVE DR.

City

RESTON

State

VA

Zip Code

20194-1304

FEC ID number of contributing
federal political committee.

C

Name of Employer

YOUNG AMERICAS FOUNDATION

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2015

Transaction ID : SA11.10708

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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PAGE 40 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

 Full Name (Last, First, Middle Initial)
WILLIAM J. RUCKER JR.

Mailing Address 244 LEE AVE.

City	State	Zip Code
BECKLEY	WV	25801-

FEC ID number of contributing federal political committee.

C

 Name of Employer
 MOUNTAIN EAGLE

 Occupation
 BEER WHOLESALER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10552

Amount of Each Receipt this Period

500.00

CONTRIBUTION

 Full Name (Last, First, Middle Initial)
JAMES K. RULAND

Mailing Address PO BOX 790

City	State	Zip Code
CHARLES TOWN	WV	25414-0790

FEC ID number of contributing federal political committee.

C

 Name of Employer
 RAI PROPERTIES

 Occupation
 OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10766

Amount of Each Receipt this Period

500.00

CONTRIBUTION

 Full Name (Last, First, Middle Initial)
MR. DANIEL RUNDE

Mailing Address 6910 BONHEIM COURT

City	State	Zip Code
MCLEAN	VA	22101-5100

FEC ID number of contributing federal political committee.

C

 Name of Employer
 CENTER FOR STRATEGIC AND INTL

 Occupation
 DIRECTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		23		2015

Transaction ID : SA11.10380

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
JACQUELINE SCHAFER

Mailing Address 3145 S STAFFORD ST

City	State	Zip Code
ARLINGTON	VA	22206-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10526

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
JOSEPH SCHAPIRO

Mailing Address 8530 PARK HEIGHTS AVE.

City	State	Zip Code
BALTIMORE	MD	21208-1717

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONTINENTAL REALTY CORPORATIONOccupation
CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10702

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
ALVYN SCHOPP

Mailing Address 10474 COLBY CANYON DRIVE

City	State	Zip Code
HIGHLANDS RANCH	CO	80129-5453

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANTERO RESOURCESOccupation
EXEC MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10746

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3950.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

RICHARD SCHREIBSTEIN

A.

Mailing Address 5204 WOODAM CT.

City

COLUMBIA

State

MD

Zip Code

21044-1447

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10703

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. STEVE SCHUH

B.

Mailing Address P.O. BOX 48

City

GIBSON ISLAND

State

MD

Zip Code

21056-

FEC ID number of contributing
federal political committee.

C

Name of Employer

ANNE ARUNDEL COUNTY, MD

Occupation

COUNTY EXECUTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2015

Transaction ID : SA11.10382

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MARC T. SHORT

C.

Mailing Address 3715 NORTH 25TH ST.

City

ARLINGTON

State

VA

Zip Code

22207-5011

FEC ID number of contributing
federal political committee.

C

Name of Employer

FREEDOM PARTNERS

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2015

Transaction ID : SA11.10711

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 43 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

GORDON SMITH**A.**

Mailing Address 8716 CRIDER BROOK WAY

City

POTOMAC

State

MD

Zip Code

20854-4547

FEC ID number of contributing
federal political committee.

C

Name of Employer

MILLER & SMITH

Occupation

BUILDER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Transaction ID : SA11.10524

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

KURT SNYDER**B.**

Mailing Address 839 BESTGATE ROAD

City

ANNAPOLIS

State

MD

Zip Code

21401-3472

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE COLBY GROUP, INC

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2015

Transaction ID : SA11.10487

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

LEE SNYDER**C.**

Mailing Address 270 INDUSTRIAL BLVD.

City

KEARNEYSVILLE

State

WV

Zip Code

25430-2774

FEC ID number of contributing
federal political committee.

C

Name of Employer

SNYDER ENVIROMENTAL

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10764

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 44 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

SHANNON SORZANO

Mailing Address 4020 N. 38TH PLACE

City

ARLINGTON

State

VA

Zip Code

22207-4602

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10547

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

RONALD STALNAKER

Mailing Address P.O. BOX 178

City

GLENVILLE

State

WV

Zip Code

26351-0178

FEC ID number of contributing
federal political committee.

C

Name of Employer

STALNAKER ENERGY

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		20		2015

Transaction ID : SA11.10489

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

NEIL SWEREN

Mailing Address 3402 OLD POST DR.

City

BALTIMORE

State

MD

Zip Code

21208-3119

FEC ID number of contributing
federal political committee.

C

Name of Employer

SOUTHERN TRUST MORTGAGE

Occupation

MANAGER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10727

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 45 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

DIANE WALKER

Mailing Address 1410 CONNELL RD.

City

CHARLESTON

State

WV

Zip Code

25314-

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2015

Transaction ID : SA11.10545

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TIMOTHY B. WEBSTER

Mailing Address 1924 37TH ST. NW

City

WASHINGTON

State

DC

Zip Code

20007-2240

FEC ID number of contributing
federal political committee.

C

Name of Employer

BASE CONNECT

Occupation

VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		09		2015

Transaction ID : SA11.10406

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TIMOTHY B. WEBSTER

Mailing Address 1924 37TH ST. NW

City

WASHINGTON

State

DC

Zip Code

20007-2240

FEC ID number of contributing
federal political committee.

C

Name of Employer

BASE CONNECT

Occupation

VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10753

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

GLENN WEINBERGA. Mailing Address **4 HUNTERSWOTH CT.**

City

OWINGS MILLS

State

MD

Zip Code

21117-1541FEC ID number of contributing
federal political committee.**C**Name of Employer
CORDISH CO.Occupation
REAL ESTATE DEV.

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		20		2015

Transaction ID : SA11.10704

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. **JERRY WOLASKY**Mailing Address **6713 WESTBROOK RD.**

City

BALTIMORE

State

MD

Zip Code

21215-1716FEC ID number of contributing
federal political committee.**C**Name of Employer
HEALTH SERVICE DISTRIBUTOR, LLCOccupation
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10728

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. **BONNIE YOUNG**Mailing Address **2631 W. CASAS CIR.**

City

TUCSON

State

AZ

Zip Code

85742-9772FEC ID number of contributing
federal political committee.**C**Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		14		2015

Transaction ID : SA11.10283

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 47 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)
GABRIEL ZINNY

Mailing Address 2220 20TH NW

City	State	Zip Code
WASHINGTON	DC	20009-5074

FEC ID number of contributing
federal political committee.

C

Name of Employer
BLUE STAR STRATEGIES

Occupation
MANAGING PARTNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

02 / **09** / **2015**

Transaction ID : **SA11.10438**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

112475.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 85

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	--	-------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT ERIC NELSON

Mailing Address PO BOX 186

City

CHARLESTON

State

WV

Zip Code

25321-0186

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2015

Transaction ID : SA11.10440

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

500.00

500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 85

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Mooney for CongressA. Full Name (Last, First, Middle Initial)
AK STEEL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 9227 CENTRE POINTE DR

City	State	Zip Code
WEST CHESTER	OH	45069-4822

FEC ID number of contributing
federal political committee.

C C00290973

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10740

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF ORTHOPEDIC SURGEONS

Mailing Address 317 MASSACHUSETTS AVE. NE

City	State	Zip Code
WASHINGTON	DC	20002-5769

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		09		2015

Transaction ID : SA11.10441

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVE NW

City	State	Zip Code
D.C.	DC	20036-3902

FEC ID number of contributing
federal political committee.

C C00004275

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10739

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

6500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 50 OF 85

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC

Mailing Address 1061 AMERICAN LANE

City SCHAUMBURG	State IL	Zip Code 60173-4973
--------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C C00255752

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2015

Transaction ID : SA11.10715

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BAMPAC

Mailing Address 1325 G STREET, NW

City WASHINGTON	State DC	Zip Code 20005-3104
--------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11.10754

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BILL PAC

Mailing Address 2470 DANIELS BRIDGE RD. STE. 121

City ATHENS	State GA	Zip Code 30606-6191
----------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C C00412288

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11.10747

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 51 OF 85

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

CHESAPEAKE PAC

Mailing Address 2470 DANIELLS BRIDGE RD STE 121

City

ATHENS

State

GA

Zip Code

30606-6191

FEC ID number of contributing
federal political committee.

C C00492819

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10738

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DELOITTE POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 365

City

D.C.

State

DC

Zip Code

20044-0365

FEC ID number of contributing
federal political committee.

C C00211318

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		23		2015

Transaction ID : SA11.10710

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DIRECT SELLING ASSOCIATION

Mailing Address 1667 K STREET NW STE. 110

City

WASHINGTON

State

DC

Zip Code

20006-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2015

Transaction ID : SA11.10690

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

5500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 85

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
EVOC REGULATORY SERVICES, INC.

Mailing Address 1001 FANNIN STREET SUITE 800

City HOUSTON	State TX	Zip Code 77002-6707
-----------------	-------------	------------------------

FEC ID number of contributing
federal political committee.**C** C00513671

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M 03	/	D D D 31	/	Y Y Y Y Y 2015
-------------	---	-------------	---	-------------------

Transaction ID : SA11.10778

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE NW

City D.C.	State DC	Zip Code 20001-2133
--------------	-------------	------------------------

FEC ID number of contributing
federal political committee.**C** C00096156

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1917.93

Date of Receipt

M M M 02	/	D D D 20	/	Y Y Y Y Y 2015
-------------	---	-------------	---	-------------------

Transaction ID : SA11.10510

Amount of Each Receipt this Period

1917.93

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HOUSE LIBERTY FUNDMailing Address 701 8TH STREET NW
SUITE 500

City WASHINGTON	State DC	Zip Code 20001-3965
--------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M 03	/	D D D 30	/	Y Y Y Y Y 2015
-------------	---	-------------	---	-------------------

Transaction ID : SA11.10737

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

7417.93

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC

Mailing Address P.O. BOX 10134

City State Zip Code
BAKERSFIELD CA 93389-0134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y
03 30 2015

Transaction ID : SA11.10734

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC

Mailing Address P.O. BOX 10134

City State Zip Code
BAKERSFIELD CA 93389-0134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y
03 30 2015

Transaction ID : SA11.10735

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL AC

Mailing Address 1101 KING ST

City State Zip Code
ALEXANDRIA VA 22314-2944

FEC ID number of contributing
federal political committee.

C C00144766

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
02 03 2015

Transaction ID : SA11.10386

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

12500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC

Mailing Address 1605 KING ST

City	State	Zip Code
ALEXANDRIA	VA	22314-2726

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10756

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE PAC

Mailing Address 51 MADISON AVE.
 ROOM 1109

City	State	Zip Code
NEW YORK	NY	10010-1603

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10730

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PRAGMATICS INCORPORATED POLITICAL ACTION COMMITTEE

Mailing Address 7926 JONES BRANCH DRIVE
 SUITE 711

City	State	Zip Code
MCLEAN	VA	22102-3374

FEC ID number of contributing federal political committee. **C** C00421487

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2015

Transaction ID : SA11.10713

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
THE FREEDOM PROJECT

Mailing Address 320 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003-1838

FEC ID number of contributing
federal political committee.**C** C00305805

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2015

Transaction ID : SA11.10781

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATIO

Mailing Address 4301 WILSON BLVD

City	State	Zip Code
ARLINGTON	VA	22203-1867

FEC ID number of contributing
federal political committee.**C** C00002972

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2015

Transaction ID : SA11.10684

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA, INC. PAC

Mailing Address 601 THIRTEENTH ST. NW, STE. 910 S

City	State	Zip Code
WASHINGTON	DC	20005-3807

FEC ID number of contributing
federal political committee.**C** C00542365

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2015

Transaction ID : SA11.10389

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

7000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

TOYOTA MOTOR NORTH AMERICA, INC. PAC

Mailing Address 601 THIRTEENTH ST. NW, STE. 910 S

City
WASHINGTONState
DCZip Code
20005-3807FEC ID number of contributing
federal political committee.**C** C00542365

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2015

Transaction ID : SA11.10685

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

VALERO PAC

Mailing Address P.O. BOX 696000

City
SAN ANTONIOState
TXZip Code
78269-6000FEC ID number of contributing
federal political committee.**C** C00109546

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11.10755

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WINNING STRATEGIES WASHINGTON PAC

Mailing Address 409 7TH ST NW

City
D.C.State
DCZip Code
20004-2309FEC ID number of contributing
federal political committee.**C** C00368993

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2015

Transaction ID : SA11.10780

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
YOPAC

Mailing Address 5631 ABERDEEN RD.

City	State	Zip Code
FAIRWAY	KS	66205-2610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : SA11.10736

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

53667.93

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CAPITO FOR WEST VIRGINIA

Mailing Address 2 COMSTOCK PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2015

City	State	Zip Code
CHARLESTON	WV	25314

Amount of Each Disbursement this Period

1692.25

Purpose of Disbursement
TRAVELCategory/
Type

Transaction ID : SB17.I867

Candidate Name

SHELLEY MOORE CAPITO MS

Office Sought:

<input type="checkbox"/> House
<input checked="" type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

CHARTER PLANE - SHARE OF THE COST

State: WV

District:

Full Name (Last, First, Middle Initial)

B. JESSICA CARTER

Mailing Address 303 SHAWNEE CIRCLE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2015

City	State	Zip Code
CHARLESTON	WV	25304

Amount of Each Disbursement this Period

3297.58

Purpose of Disbursement
FINANCE CONSULTINGCategory/
Type

Transaction ID : SB17.I855

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. STEPHANIE COOPER

Mailing Address P.O. BOX 785

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Amount of Each Disbursement this Period

2250.00

Purpose of Disbursement
PAYROLLCategory/
Type

Transaction ID : SB17.I848

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7239.83

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I860

B. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I861

C. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I865

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I866

B. MICHAEL HACKL

Mailing Address PO BOX 6732

City	State	Zip Code
CHARLESTON	WV	25362

Purpose of Disbursement
BARTENDING SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2015

Amount of Each Disbursement this Period

90.00

Transaction ID : SB17.I917

C. MR. RAINER KISSEL

Mailing Address 749 NADENBOUSCH LN.

City	State	Zip Code
MARTINSBURG	WV	25403

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2015

Amount of Each Disbursement this Period

385.60

Transaction ID : SB17.I853

GAS, MEALS, TOLLS JAN-FEB.

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

975.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. ADP, LLC

Mailing Address ONE ADP DR., MS-100

City	State	Zip Code
AUGUSTA	GA	30909

Purpose of Disbursement
PAYROLL SVC

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2015

Amount of Each Disbursement this Period

87.45

Transaction ID : SB17.I876

B. ADP, LLC

Mailing Address ONE ADP DR., MS-100

City	State	Zip Code
AUGUSTA	GA	30909

Purpose of Disbursement
PAYROLL SVC

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2015

Amount of Each Disbursement this Period

70.70

Transaction ID : SB17.I889

c. ADP, LLC

Mailing Address ONE ADP DR., MS-100

City	State	Zip Code
AUGUSTA	GA	30909

Purpose of Disbursement
PAYROLL SVC

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		06		2015

Amount of Each Disbursement this Period

87.45

Transaction ID : SB17.I907

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

245.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. AMERICA DIRECT, INC.Mailing Address 1272 CORPORATE PARK DR.
SECOND FLOOR

City FOREST State VA Zip Code 24551

Purpose of Disbursement
LIST MANAGEMENT SVC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

Amount of Each Disbursement this Period

3764.83

Transaction ID : SB17.I875

B. AMERICAN EXPRESS

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

Amount of Each Disbursement this Period

7.95

Transaction ID : SB17.I877

C. AMERICAN EXPRESS

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2015

Amount of Each Disbursement this Period

53.50

Transaction ID : SB17.I879

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3826.28

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 53852

City	State	Zip Code
PHOENIX	AZ	85072

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2015

Amount of Each Disbursement this Period

225.72

Transaction ID : SB17.I906

B. BEARS DEN

Mailing Address 405 CAPITOL ST. #2

City	State	Zip Code
CHARLESTON	WV	25301

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2015

Amount of Each Disbursement this Period

74.55

Transaction ID : SB17.I890

c. BGRMailing Address 300 FOXCROFT AVE.
SUITE 303

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement
RENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2015

Amount of Each Disbursement this Period

790.00

Transaction ID : SB17.I847

FEBRUARY AND MARCH

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1090.27

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. BRIDGE ROAD BISTRO

Mailing Address 915 BRIDGE RD.

City	State	Zip Code
CHARLESTON	WV	25314

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2015

Amount of Each Disbursement this Period

90.91

Transaction ID : SB17.I914

B. CAMPAIGN SOLUTIONS

Mailing Address 117 NORTH SAINT ASOPH ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2015

Amount of Each Disbursement this Period

543.95

Transaction ID : SB17.I870

FUNDRAISING EMAILS

C. CATERING UNLIMITED, INC.

Mailing Address 241 CAPITOL STREET, PO BOX 11248

City	State	Zip Code
CHARLESTON	WV	25339

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.I916

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

934.86

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2015

Amount of Each Disbursement this Period

798.00

Transaction ID : SB17.I888

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2015

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.I891

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2015

Amount of Each Disbursement this Period

74.25

Transaction ID : SB17.I897

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1122.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2015

Amount of Each Disbursement this Period

113.32

Transaction ID : SB17.I898

B. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2015

Amount of Each Disbursement this Period

798.00

Transaction ID : SB17.I901

C. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2015

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.I904

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1161.32

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

134.50

Purpose of Disbursement
CREDIT CARD FEESCategory/
Type**Transaction ID : SB17.I905**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

798.00

Purpose of Disbursement
COMPLIANCE CONSULTINGCategory/
Type**Transaction ID : SB17.I911**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

208.75

Purpose of Disbursement
CREDIT CARD FEESCategory/
Type**Transaction ID : SB17.I912**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1141.25

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. COMCAST

Mailing Address 302 N MILDRED ST.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2015

Amount of Each Disbursement this Period

819.97

Transaction ID : SB17.I843

B. COMCAST

Mailing Address 302 N MILDRED ST.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2015

Amount of Each Disbursement this Period

234.18

Transaction ID : SB17.I856

C. COMCAST

Mailing Address 302 N MILDRED ST.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		11		2015

Amount of Each Disbursement this Period

390.47

Transaction ID : SB17.I863

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

819.97

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. COMCAST COMMUNICATIONS

Mailing Address PO BOX 3005

City	State	Zip Code
SOUTHEASTERN	PA	19398

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02	/	02	/	2015

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.I892

B. CONQUESTMailing Address 2812 EMERYWOOD PKY
STE. 103

City	State	Zip Code
RICHMOND	VA	23294

Purpose of Disbursement
MESSAGE PHONE CALLS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	30	/	2015

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.I872

C. EXPEDIA INC.

Mailing Address 333 108TH AVE. NE

City	State	Zip Code
BELLEVUE	WA	98004

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	30	/	2015

Amount of Each Disbursement this Period

106.69

Transaction ID : SB17.I913

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5302.01

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address 3965 AIRWAYS MODULE G

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2015

City	State	Zip Code
MEMPHIS	TN	38116

Amount of Each Disbursement this Period

331.45

Purpose of Disbursement
POSTAGECategory/
Type

Transaction ID : SB17.I882

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. FLAME CAMPAIGNS

Mailing Address 121 S ORANGE AVE STE 1430A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		09		2015

City	State	Zip Code
ORLANDO	FL	32801

Amount of Each Disbursement this Period

90.00

Purpose of Disbursement
WEB SERVICECategory/
Type

Transaction ID : SB17.I908

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. FRONTIER COMMUNICATIONS

Mailing Address 1398 S. WOODLAND BLVD. SUITE B

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2015

City	State	Zip Code
DELAND	FL	32720

Amount of Each Disbursement this Period

215.45

Purpose of Disbursement
UTILITIESCategory/
Type

Transaction ID : SB17.I845

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

331.45

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. FRONTIER COMMUNICATIONS

Mailing Address 1398 S. WOODLAND BLVD. SUITE B

City	State	Zip Code
DELAND	FL	32720

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2015

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.I846

B. FRONTIER COMMUNICATIONS

Mailing Address 1398 S. WOODLAND BLVD. SUITE B

City	State	Zip Code
DELAND	FL	32720

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2015

Amount of Each Disbursement this Period

115.02

Transaction ID : SB17.I857

C. FRONTIER COMMUNICATIONS

Mailing Address 1398 S. WOODLAND BLVD. SUITE B

City	State	Zip Code
DELAND	FL	32720

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2015

Amount of Each Disbursement this Period

80.71

Transaction ID : SB17.I858

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

395.73

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. FRONTIER COMMUNICATIONS

Mailing Address 1398 S. WOODLAND BLVD. SUITE B

City	State	Zip Code
DELAND	FL	32720

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 20 / 2015

Amount of Each Disbursement this Period

173.83

Transaction ID : SB17.I869

B. HAFER REALESTATE GROUPMailing Address 300 FOXCROFT AVE.
SUITE 300

City	State	Zip Code
MARTINSBURGE	WV	25401

Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 12 / 2015

Amount of Each Disbursement this Period

175.00

Transaction ID : SB17.I844

C. HYATT REGENCY

Mailing Address 400 NEW JERSEY AVE.

City	State	Zip Code
WASHINGTON	DC	20001

Purpose of Disbursement
TRAVEL-HOTEL

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 12 / 2015

Amount of Each Disbursement this Period

545.77

Transaction ID : SB17.I880

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

894.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. JETBLUE

Mailing Address BREWSTER BUILDING

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2015

City	State	Zip Code
LONG ISLAND CITY	NY	11101

Amount of Each Disbursement this Period

398.98

Purpose of Disbursement
TRAVELCategory/
Type**Transaction ID : SB17.I903**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. KINGS NY STYLE PIZZA

Mailing Address 43 RULAND RD. STE. C

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2015

City	State	Zip Code
KEARNEYSVILLE	WV	25430

Amount of Each Disbursement this Period

61.37

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type**Transaction ID : SB17.I881**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. LOGANS

Mailing Address 115 RETAIL COMMONS PKWY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2015

City	State	Zip Code
MARTINSBURG	WV	25403

Amount of Each Disbursement this Period

90.22

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type**Transaction ID : SB17.I884**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

550.57

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. LUIGIONE CATERING SERVICE

Mailing Address 13504 CLASSIC OAKS CT.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2015

City	State	Zip Code
MANASSAS	VA	20112

Amount of Each Disbursement this Period

3000.00

Purpose of Disbursement
CATERINGCategory/
Type**Transaction ID : SB17.I838**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. MARTINS FUEL

Mailing Address RTE. 340 & 17

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Amount of Each Disbursement this Period

31.00

Purpose of Disbursement
TRAVEL-GASCategory/
Type**Transaction ID : SB17.I887**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. MARTINS FUEL

Mailing Address RTE. 340 & 17

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Amount of Each Disbursement this Period

22.00

Purpose of Disbursement
TRAVEL-GASCategory/
Type**Transaction ID : SB17.I896**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3053.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. MOUNTAINEER MART

Mailing Address 39 KELLY ISLAND RD.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement
TRAVEL-GAS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2015

Amount of Each Disbursement this Period

50.51

Transaction ID : SB17.I878

B. ORBITZ WORLDWIDE INC.

Mailing Address 500 W. MADISON, SUITE 1000

City	State	Zip Code
CHICAGO	IL	60661

Purpose of Disbursement
TRAVEL-HOTEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2015

Amount of Each Disbursement this Period

110.98

Transaction ID : SB17.I883

C. POLITICAL EQUITY CONSULTING

Mailing Address 3213 DUKE ST. #685

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2015

Amount of Each Disbursement this Period

8969.93

Transaction ID : SB17.I841

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9131.42

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. POLITICAL EQUITY CONSULTING

Mailing Address 3213 DUKE ST. #685

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2015

Amount of Each Disbursement this Period

3345.77

Transaction ID : SB17.I852

B. POLITICAL EQUITY CONSULTING

Mailing Address 3213 DUKE ST. #685

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		11		2015

Amount of Each Disbursement this Period

4506.18

Transaction ID : SB17.I862

C. RESPONSE AMERICAMailing Address 211 NORTH UNION STREET
SUITE 200

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
DATA PROCESSING SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

Amount of Each Disbursement this Period

4608.27

Transaction ID : SB17.I873

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

12460.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 160 PATRICK HENRY WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Amount of Each Disbursement this Period

128.25

Purpose of Disbursement
OFFICE SUPPLIESCategory/
Type

Transaction ID : SB17.I840

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 160 PATRICK HENRY WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Amount of Each Disbursement this Period

495.86

Purpose of Disbursement
OFFICE SUPPLIESCategory/
Type

Transaction ID : SB17.I851

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. THE CONGRESSIONAL INSTITUTE

Mailing Address 1700 DIAGONAL RD.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2015

City	State	Zip Code
ALEXANDRIA	VA	22314

Amount of Each Disbursement this Period

1367.00

Purpose of Disbursement
REGISTRATION FEE

N/A

Category/
Type

Transaction ID : SB17.I837

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1991.11

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. THE LEADERSHIP INSTITUTE

Mailing Address 1101 N HIGHLAND ST

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement
POLITICAL TRAINING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		23		2015

Amount of Each Disbursement this Period

85.00

Transaction ID : SB17.I886

B. THE LEADERSHIP INSTITUTE

Mailing Address 1101 N HIGHLAND ST

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement
POLITICAL TRAINING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2015

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.I894

C. THE LEADERSHIP INSTITUTE

Mailing Address 1101 N HIGHLAND ST

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement
POLITICAL TRAINING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2015

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.I899

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

245.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES INC.

Mailing Address 233 S. WACKER DR.

City	State	Zip Code
CHICAGO	IL	60606

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2015

Amount of Each Disbursement this Period

585.60

Transaction ID : SB17.I909

B. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD.

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2015

Amount of Each Disbursement this Period

263.10

Transaction ID : SB17.I885

C. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD.

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2015

Amount of Each Disbursement this Period

476.20

Transaction ID : SB17.I893

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1324.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD.

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2015

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.I902

B. USPS

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2015

Amount of Each Disbursement this Period

245.00

Transaction ID : SB17.I842

c. USPS

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2015

Amount of Each Disbursement this Period

2940.00

Transaction ID : SB17.I849

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3385.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2015

Amount of Each Disbursement this Period

220.00

Transaction ID : SB17.I859

B. VERIZON

Mailing Address PO BOX 4003

City	State	Zip Code
ACWORTH	GA	30101

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2015

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.I868

C. WEIS MARKETS

Mailing Address 217 OAK LEE DR. #15

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
TRAVEL-GAS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2015

Amount of Each Disbursement this Period

47.00

Transaction ID : SB17.I895

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

467.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. WEIS MARKETS

Mailing Address 217 OAK LEE DR. #15

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2015

City	State	Zip Code
RANSON	WV	25438

Amount of Each Disbursement this Period

53.00

Purpose of Disbursement
TRAVEL-GASCategory/
Type**Transaction ID : SB17.I900**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. WEIS MARKETS

Mailing Address 217 OAK LEE DR. #15

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2015

City	State	Zip Code
RANSON	WV	25438

Amount of Each Disbursement this Period

54.00

Purpose of Disbursement
TRAVEL-GASCategory/
Type**Transaction ID : SB17.I915**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. WIN RIGHT DATA COMPANY, LLC

Mailing Address 1252 RAMBLING RILL CIRCLE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		11		2015

City	State	Zip Code
STATHAM	GA	30666

Amount of Each Disbursement this Period

423.65

Purpose of Disbursement
MESSAGE PHONE CALLSCategory/
Type**Transaction ID : SB17.I864**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

530.65

73710.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 85

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. ELEANOR RAHE

Mailing Address 6045 BARBERRY HOLW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2015

City	State	Zip Code
COLOMBUS	OH	43213

Amount of Each Disbursement this Period

Purpose of Disbursement
REFUND

200.00

Candidate Name

Category/
Type

Transaction ID : SB20A.I850

Office Sought:	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)	
	<input type="checkbox"/> President			

State: District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)	
	<input type="checkbox"/> President			

State: District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)	
	<input type="checkbox"/> President			

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

200.00

200.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 85 OF 85

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEEMailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		12		2015

Amount of Each Disbursement this Period

82.07

Transaction ID : SB21.I871

CATERING AND ROOM RENTAL

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

82.07

82.07
